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## \*BIBDATASHEET\*

Bib Data Sheet

CONFIRMATION NO. 4820

SERIAL NUMBER 10/767,036	FILING DATE 01/29/2004 RULE	CLASS 294	GROUP ART UNIT 3652	ATTORNEY DOCKET NO. Beal-01
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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *NON* <sup>E</sup>\*\* FOREIGN APPLICATIONS \*\*\*\*\* *NON* <sup>E</sup>

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 06/14/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY TX	SHEETS DRAWING 4	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>Patricia</i> Examiner's Signature <i>ptc</i> Initials				

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## TITLE

Safety device for holding a vial or ampule while extracting liquid contents with a syringe

FILING FEE RECEIVED 394	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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